

**Supplementary Application**

 **Post-Baccalaureate Certificate in Biomedical Sciences (CBioMed) Program**

**Application Deadline: February 14, 2020**

**Directions for Completing the Application**

Before beginning the supplementary application, please make sure you have read the Information and Guidelines booklet posted on the HPAC website [www.utdallas.edu/prehealth](http://www.utdallas.edu/prehealth).

Please complete all sections of the application. Blank spaces are acceptable in Section 2 tables, “Previous Academic Work” and “All Previous Science Work,” if your academic record does not fill the entire table. All previous attempted college-level science coursework, however, must be included. Science coursework for purposes of this supplementary application includes: biology, chemistry, physics and/or mathematics courses for science majors as well as neuroscience coursework. Psychology courses are not to be included. Incomplete applications will not be considered.

You may then e-mail the **supplementary application** as an attachment to prehealth@utdallas.edu or send it via regular mail to:

The University of Texas at Dallas

Health Professions Advising Center

800 W. Campbell Road, FO30

Richardson, TX 75080-3021

We will send a confirmation e-mail within five days of the receipt of your supplementary application. Please contact Mrs. Shirley Y. Anderson if you have questions.

Applications will be reviewed after the primary *ApplyTexas* and Supplementary CBioMed applications both are completed and submitted. If your applications are not complete, please do not contact The University of Texas at Dallas or the Health Professions Advising Center to inquire about whether you have been accepted to the CBioMed program. A review of completed applications will occur approximately every three weeks and applicants notified by email in a timely fashion if they have been accepted, rejected or placed on hold. We are not able to project the likelihood of acceptance prior to review and encourage applicants to work with the pre-health advising office at their undergraduate institutions. Accepted applicants may begin the CBioMed program in the summer or the fall of 2020.

Submit official electronic or sealed transcripts from all colleges and universities previously attended to:

The University of Texas at Dallas
Office of Admission and Enrollment
800 W. Campbell Rd.
Richardson, TX 75080-3021

Submit official electronic or sealed transcripts from all colleges and universities previously attended to:

The University of Texas at Dallas

Office of Admission and Enrollment

800 W. Campbell Rd.

Richardson, TX 75080-3021

Thank you for applying to the CBioMed program.

*Please double-click on each shaded box to input your information.*

 **Section 1: Personal Information**

Full Name:

UT Dallas ID Number:

(Your UT Dallas ID number contains 10 digits and was assigned to you by Admissions upon completion of your ApplyTexas application)

Email Address:

Current Phone Number: ( ) -

**Section 2: Enrollment Information**

Choose one for each item.

If admitted to the program:

* Do you plan to enroll as a [ ]  Full-time student [ ]  Part-time student
* Do you plan to be employed while attending UTD [ ]  Yes [ ]  No

If yes, approximately how many hours per week

**Section 3: Previous Academic Work**

If you have not yet completed your degree, indicate on the chart below the expected date your degree will be conferred.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| College | Dates Attended(Month/Year – Month/Year) | Total Credit Hours | Cumulative GPA | Science Hours | Science GPA | Degree Earned |
|   |  -  |   |   |   |   |   |
|   |  -  |   |   |   |   |   |
|   |  -  |   |   |   |   |   |
|   |  -  |   |   |   |   |   |
|  |  -  |   |   |   |   |   |

To submit additional colleges, please create and attach a document containing all required information entitled “Additional Colleges (YOUR NAME)”.

**Section 4: Previous Attempted Science Coursework**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Course Number | Course Title | Credit Hours | College | Year | Grade Earned |
|   |   |   |   |   |   |
|   |   |   |   |   |   |
|   |   |   |   |   |   |
|   |   |   |   |   |   |
|   |   |   |   |   |   |
|   |   |   |   |   |   |
|   |   |   |   |   |   |
|   |   |   |   |   |   |
|   |   |   |   |   |   |
|   |   |   |   |   |   |
|   |   |   |   |   |   |
|   |   |   |   |   |   |
|   |   |   |   |   |   |
|   |   |   |   |   |   |
|   |   |   |   |   |   |
|   |   |   |   |   |   |
|   |   |   |   |   |   |
|   |   |   |   |   |   |
|   |   |   |   |   |   |
|   |   |   |   |   |   |
|   |   |   |   |   |   |
|   |   |   |   |   |   |
|   |   |   |   |   |   |
|   |   |   |   |   |   |
|   |   |   |   |   |   |

**Section 5: Work Experience**

Describe your work history over the past 10 years, including positions held, dates of employment, and brief job descriptions (800 character limit). In lieu of writing out position(s) held, you may attach a resume.

**Section 6: Healthcare Experience**

Briefly describe your previous experience in healthcare that is not included in Section 5: Work Experience. Include in this section any healthcare related volunteer or shadowing experiences (800 character limit).

 **Section 7: Interests in Healthcare**

Which health profession are you most interested in pursuing?

 a. Dentistry [ ]  b. Medicine [ ]  c. Podiatry [ ]

Briefly describe your interest in seeking a health profession in dentistry, medicine, or podiatry. Please include information regarding the timing and circumstances of your decision, as well as your motivation for pursuing this interest at the present time (1000 character limit).

**Section 8: The Program**

Briefly explain your interest in the CBioMed Program at UT Dallas, including what you hope to gain from the program (500 character limit).

Briefly explain your vision of your daily routine if accepted into the CBioMed program, including desired coursework and whether you intend to approach your academic work in the CBioMed program differently than you did when previously enrolled in college (800 character limit).

**Section 9: Additional Information**

Please include additional information you believe would be helpful to consider during the evaluation of your application. Please note that although DAT and MCAT scores are not required for the CBioMed application, previous DAT or MCAT scores may assist in the evaluation of your application. A non-competitive MCAT or DAT score does not necessarily mean that your application won’t be considered. We ask for this information in order to determine what course track may be most beneficial to you. (800 character limit).